

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF SOUTH CAROLINA

Case number (if known) Chapter 7

☐ Check if this an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

4/16

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name Travinia Italian Kitchen Holdings, Inc

2. All other names debtor used in the last 8 years

Include any assumed names, trade names and doing business as names

3. Debtor's federal Employer Identification Number (EIN) 45-1353701

4. Debtor's address Principal place of business Mailing address, if different from principal place of business

1200 Woodruff Rd
C-36
Greenville, SC 29607

Number, Street, City, State & ZIP Code

Greenville
County

P.O. Box, Number, Street, City, State & ZIP Code

Location of principal assets, if different from principal place of business

Number, Street, City, State & ZIP Code

5. Debtor's website (URL) https://www.traviniaitaliankitchen.com/

6. Type of debtor ☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))
☐ Partnership (excluding LLP)
☐ Other. Specify:

Debtor **Travinia Italian Kitchen Holdings, Inc**
Name

Case number (if known)

7. Describe debtor's business A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply

- ☐ Tax-exempt entity (as described in 26 U.S.C. §501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor.

See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.5511**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

Check one:

☒ Chapter 7☐ Chapter 9☐ Chapter 11. Check all that apply:

- ☐ Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,566,050 (amount subject to adjustment on 4/01/19 and every 3 years after that).
- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). If the debtor is a small business debtor, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if all of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☒ No.☐ Yes.

If more than 2 cases, attach a separate list.

District	_____	When	_____	Case number	_____
District	_____	When	_____	Case number	_____

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?☐ No☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor	See Attachment	Relationship	_____
District	_____	When	_____
		Case number, if known	_____

Debtor **Travinia Italian Kitchen Holdings, Inc**
Name

Case number (if known)

11. Why is the case filed in this district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?☒ No☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.**Why does the property need immediate attention?** (Check all that apply.)☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.

What is the hazard? _____

☐ It needs to be physically secured or protected from the weather.☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).☐ Other _____**Where is the property?** _____

Number, Street, City, State & ZIP Code

Is the property insured?☐ No☐ Yes. Insurance agency _____

Contact name _____

Phone _____

Statistical and administrative information**13. Debtor's estimation of available funds**

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors☒ 1-49☐ 50-99☐ 100-199☐ 200-999☐ 1,000-5,000☐ 5001-10,000☐ 10,001-25,000☐ 25,001-50,000☐ 50,001-100,000☐ More than 100,000**15. Estimated Assets**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☒ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion**16. Estimated liabilities**☐ \$0 - \$50,000☐ \$50,001 - \$100,000☐ \$100,001 - \$500,000☐ \$500,001 - \$1 million☒ \$1,000,001 - \$10 million☐ \$10,000,001 - \$50 million☐ \$50,000,001 - \$100 million☐ \$100,000,001 - \$500 million☐ \$500,000,001 - \$1 billion☐ \$1,000,000,001 - \$10 billion☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion

Debtor **Travinia Italian Kitchen Holdings, Inc**
Name

Case number (if known)

Request for Relief, Declaration, and Signatures**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**17. Declaration and signature
of authorized
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **March 6, 2019**
MM / DD / YYYY**X /s/ Mark Craig**

Signature of authorized representative of debtor

Mark Craig

Printed name

Title **CEO of Travinia Italian Kitchen
Holdings, Inc.****18. Signature of attorney****X /s/ Adam J. Floyd**

Signature of attorney for debtor

Date **March 6, 2019**

MM / DD / YYYY

Adam J. Floyd

Printed name

Beal, LLC

Firm name

**PO Box 11277
Columbia, SC 29211**

Number, Street, City, State & ZIP Code

Contact phone **803-728-0803**Email address **ccooper@bealllc.com****10749 SC**

Bar number and State

Debtor **Travinia Italian Kitchen Holdings, Inc**
Name

Case number (if known)

Fill in this information to identify your case:

United States Bankruptcy Court for the:

DISTRICT OF SOUTH CAROLINA

Case number (if known)

Chapter

7☐ Check if this an amended filing**FORM 201. VOLUNTARY PETITION****Pending Bankruptcy Cases Attachment**

Debtor	Travinia Italian Kitchen at Charlottesville, LLC	Relationship to you
District	South Carolina	When 3/06/19
Case number, if known		
Debtor	Travinia Italian Kitchen at Leesburg, LLC	Relationship to you
District	South Carolina	When 3/06/19
Case number, if known		
Debtor	Travinia Italian Kitchen at Morrisville	Relationship to you
District	South Carolina	When 3/06/19
Case number, if known		
Debtor	Travinia Italian Kitchen at Richmond, LLC	Relationship to you
District	South Carolina	When 3/06/19
Case number, if known		

Subsidiary / Affiliate**Subsidiary / Affiliate****Subsidiary/Affiliate****Subsidiary / Affiliate**

Fill in this information to identify the case:

Debtor name Travinia Italian Kitchen Holdings, Inc

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

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An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ Amended Schedule _____
- ☐ Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 6, 2019

X /s/ Mark Craig

Signature of individual signing on behalf of debtor

Mark Craig

Printed name

CEO of Travinia Italian Kitchen Holdings, Inc.

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Travinia Italian Kitchen Holdings, Inc

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. **Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)

1a. **Real property:**

Copy line 88 from *Schedule A/B*..... \$ **0.00**

1b. **Total personal property:**

Copy line 91A from *Schedule A/B*..... \$ **2,755,393.81**

1c. **Total of all property:**

Copy line 92 from *Schedule A/B*..... \$ **2,755,393.81**

Part 2: Summary of Liabilities

2. **Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **8,094.49**

3. **Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)

3a. **Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **0.00**

3b. **Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **6,279,175.67**

4. **Total liabilities**
Lines 2 + 3a + 3b

\$ **6,287,270.16**

Fill in this information to identify the case:

Debtor name Travinia Italian Kitchen Holdings, Inc

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

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Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. Branch Banking & Trust payroll

checking

2754

\$5,873.81

3.2. Branch Banking & Trust Operating

checking

7847

\$0.00

4. Other cash equivalents (Identify all)

5. Total of Part 1.

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$5,873.81

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes Fill in the information below.

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☒ No. Go to Part 4.
☐ Yes Fill in the information below.

Part 4: Investments

13. Does the debtor own any investments?

Debtor Travinia Italian Kitchen Holdings, Inc Case number (If known) _____
Name

- ☐ No. Go to Part 5.
☒ Yes Fill in the information below.

			Valuation method used for current value	Current value of debtor's interest
14.	Mutual funds or publicly traded stocks not included in Part 1 Name of fund or stock:			
15.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture Name of entity:			
		% of ownership		
15.1.	<u>Travinia Italian Kitchen at Charlottesville, LLC</u>	<u>100</u> %		<u>Unknown</u>
15.2.	<u>Travinia Italian Kitchen at Leesburg, LLC</u>	<u>100</u> %		<u>Unknown</u>
15.3.	<u>Travinia Italian Kitchen at Morrisville, LLC</u>	<u>100</u> %		<u>\$0.00</u>
15.4.	<u>Travinia Italian Kitchen at Richmond, LLC</u>	<u>100</u> %		<u>Unknown</u>
15.5.	<u>Travinia Italian Kitchen at Asheville, LLC</u>	<u>100</u> %		<u>\$0.00</u>
15.6.	<u>Travinia Italian Kitchen at Aiken, LLC</u>	<u>100</u> %		<u>\$0.00</u>
15.7.	<u>Travinia Italian Kitchen at Destin, LLC</u>	<u>100</u> %		<u>\$0.00</u>
15.8.	<u>Travinia Italian Kitchen at Lexington, LLC</u>	<u>100</u> %		<u>\$0.00</u>
15.9.	<u>Travinia Italian Kitchen at Newport News, LLC</u>	<u>100</u> %		<u>\$0.00</u>
15.10.	<u>Travinia Italian Kitchen at Woodbridge, LLC</u>	<u>100</u> %		<u>\$0.00</u>
15.11.	<u>Travinia Italian Kitchen at Philadelphia, LLC</u>	<u>100</u> %		<u>\$0.00</u>

16. **Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1**
Official Form 206A/B Schedule A/B Assets - Real and Personal Property

Debtor Travinia Italian Kitchen Holdings, Inc Case number (If known) _____
Name

Describe:

17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

\$0.00

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☒ No. Go to Part 6.
☐ Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

- ☒ No. Go to Part 7.
☐ Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☒ No. Go to Part 8.
☐ Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)		Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles				
47.1.	<u>2014 Chevy Cruz</u>	<u>Unknown</u>	<u>Comparable sale</u>	<u>\$4,896.00</u>
47.2.	<u>2015 Chevy Sonic</u>	<u>Unknown</u>	<u>Comparable sale</u>	<u>\$4,066.00</u>

48. **Watercraft, trailers, motors, and related accessories** Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels

49. **Aircraft and accessories**

50. **Other machinery, fixtures, and equipment (excluding farm machinery and equipment)**

51. **Total of Part 8.**

Add lines 47 through 50. Copy the total to line 87.

\$8,962.00

52. **Is a depreciation schedule available for any of the property listed in Part 8?**

- ☒ No
☐ Yes

53. **Has any of the property listed in Part 8 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Debtor Travinia Italian Kitchen Holdings, Inc Case number (If known) _____
Name

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
☒ Yes Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available).	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1. 1200 Woodruff Rd C-36 Greenville, SC 29607	Lease Hold Interest	Unknown		Unknown

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets.
Copy the total to line 88.

\$0.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
61. Internet domain names and websites TraviniaItalianKitchen.com	\$0.00		\$0.00

62. Licenses, franchises, and royalties

63. Customer lists, mailing lists, or other compilations

64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107?

- ☒ No
☐ Yes

Debtor Travinia Italian Kitchen Holdings, Inc Case number (If known) _____
Name

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

☐ No. Go to Part 12.
☒ Yes Fill in the information below.

Current value of
debtor's interest

71. **Notes receivable**

Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

2017 NOL

Tax year **2017**

\$2,740,558.00

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit has been filed)**

75. **Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** Examples: Season tickets, country club membership

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$2,740,558.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

☒ No
☐ Yes

Debtor Travinia Italian Kitchen Holdings, Inc Case number (If known) _____
Name

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$5,873.81	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	\$0.00	
83. Investments. <i>Copy line 17, Part 4.</i>	\$0.00	
84. Inventory. <i>Copy line 23, Part 5.</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	\$0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	\$8,962.00	
88. Real property. <i>Copy line 56, Part 9.....></i>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ \$2,740,558.00	
91. Total. Add lines 80 through 90 for each column	\$2,755,393.81	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$2,755,393.81

Debtor name **Travinia Italian Kitchen Holdings, Inc**

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number (if known) _____

12/15

Best Case Bankruptcy

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if know)

Name

☒ No

☐ Contingent

☐ Yes. Specify each creditor,
including this creditor and its relative
priority.

☐ Unliquidated

☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$8,094.49

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did
you enter the related creditor?

Last 4 digits of
account number for
this entity

Fill in this information to identify the case:

Debtor name Travinia Italian Kitchen Holdings, Inc

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☒ No. Go to Part 2.
- ☐ Yes. Go to line 2.

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address American Express PO Box 30384 Salt Lake City, UT 84130 Date(s) debt was incurred <u>2015</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit card purchases</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$28,000.00
3.2	Nonpriority creditor's name and mailing address Branch Banking & Trust PO Box 58005 Charlotte, NC Date(s) debt was incurred <u>7/25/2013</u> Last 4 digits of account number <u>0004</u>	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$174,886.50
3.3	Nonpriority creditor's name and mailing address Charter PO Box 742614 Cincinnati, OH 45274 Date(s) debt was incurred <u>January 2019</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet and Phone</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$300.00
3.4	Nonpriority creditor's name and mailing address Federal Realty Investments Po Box 8500 Philadelphia, PA 19178 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes \$39,330.56

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known)

Name

3.5	Nonpriority creditor's name and mailing address First Reliance PO Box 6109 Florence, SC 29502 Date(s) debt was incurred <u>6/30/2015</u> Last 4 digits of account number <u>5389</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$614,037.34
3.6	Nonpriority creditor's name and mailing address JBG Woodbridge c/o Tennenbaum and Saas 4504 Walsh St., #200 Chevy Chase, MD 20815 Date(s) debt was incurred <u>2016</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$260,712.00
3.7	Nonpriority creditor's name and mailing address Larry McKinny 5751 August Rd Greenville, SC 29605 Date(s) debt was incurred <u>2011</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Preferred Stockholder</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100,000.00
3.8	Nonpriority creditor's name and mailing address Laurens Electric 1201 E Butler Rd. Greenville, SC 29607 Date(s) debt was incurred <u>January 2019</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$200.00
3.9	Nonpriority creditor's name and mailing address Linzell Harris 472 Hallman Court Downingtown, PA 19335 Date(s) debt was incurred <u>2011</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Preferred Stockholder</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$100,000.00
3.10	Nonpriority creditor's name and mailing address MBS3 LLC 26 Sable Glen Dr Greenville, SC 29615 Date(s) debt was incurred <u>2011</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Preferred Stockholder</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250,000.00
3.11	Nonpriority creditor's name and mailing address NWFCU 2545 Centerville Road Herndon, VA 20171 Date(s) debt was incurred <u> </u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$676,172.00

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known)

Name

3.12 Nonpriority creditor's name and mailing address

**OCT Stonefield Properties
240 Royal Palm Way #201
Palm Beach, FL 33480**

Date(s) debt was incurred

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Guaranty**

Is the claim subject to offset? ☒ No ☐ Yes

\$95,464.64

3.13 Nonpriority creditor's name and mailing address

**Reinhart TN
100 Buffalo Rd Extension
Johnson City, TN 37601**

Date(s) debt was incurred **2019**

Last 4 digits of account number **7245**

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Guaranty**

Is the claim subject to offset? ☒ No ☐ Yes

\$63,892.23

3.14 Nonpriority creditor's name and mailing address

**Reinhart VA
1201 Progress Rd
Richmond, VA 23234**

Date(s) debt was incurred **2019**

Last 4 digits of account number **5478**

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Guaranty**

Is the claim subject to offset? ☒ No ☐ Yes

\$82,887.55

3.15 Nonpriority creditor's name and mailing address

**Reinhart VA
1201 Progress Rd
Richmond, VA 23234**

Date(s) debt was incurred **2019**

Last 4 digits of account number **5847**

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Guaranty**

Is the claim subject to offset? ☒ No ☐ Yes

\$85,156.04

3.16 Nonpriority creditor's name and mailing address

**Reinhart VA
1201 Progress Rd
Richmond, VA 23234**

Date(s) debt was incurred **2018**

Last 4 digits of account number **5848**

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Guaranty**

Is the claim subject to offset? ☒ No ☐ Yes

\$6,043.06

3.17 Nonpriority creditor's name and mailing address

**Reinhart VA
1201 Progress Rd
Richmond, VA 23234**

Date(s) debt was incurred **2019**

Last 4 digits of account number **5849**

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Guaranty**

Is the claim subject to offset? ☒ No ☐ Yes

\$73,074.09

3.18 Nonpriority creditor's name and mailing address

**SCRP
1109 Medical Center Dr
Augusta, GA 30909**

Date(s) debt was incurred **2011**

Last 4 digits of account number

As of the petition filing date, the claim is: *Check all that apply.*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: **Preferred Stockholder**

Is the claim subject to offset? ☒ No ☐ Yes

\$250,000.00

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known)

Name

3.19	Nonpriority creditor's name and mailing address Store Master Funding 8377 E. Hartford Scottsdale, AZ 85255 Date(s) debt was incurred <u>2018</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$72,000.00
3.20	Nonpriority creditor's name and mailing address Suntrust Bank PO Bank 79079 Baltimore, MD 21279 Date(s) debt was incurred <u>1/24/2013</u> Last 4 digits of account number <u>6739</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$113,854.23
3.21	Nonpriority creditor's name and mailing address Sysco AL 2001 W Magnolia Ave Geneva, AL 36340 Date(s) debt was incurred <u>2016</u> Last 4 digits of account number <u>0534</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$43,175.00
3.22	Nonpriority creditor's name and mailing address Sysco Food Services of Virginia, LLC 5081 South Valley Pike Harrisonburg, VA 22801 Date(s) debt was incurred <u>2016</u> Last 4 digits of account number <u>9957</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$52,839.50
3.23	Nonpriority creditor's name and mailing address Sysco Food Services of Virginia, LLC 5081 South Valley Pike Harrisonburg, VA 22801 Date(s) debt was incurred <u>2016</u> Last 4 digits of account number <u>8682</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,628.16
3.24	Nonpriority creditor's name and mailing address Sysco Food Services of Virginia, LLC 5081 South Valley Pike Harrisonburg, VA 22801 Date(s) debt was incurred <u>2016</u> Last 4 digits of account number <u>8080</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$30,133.93
3.25	Nonpriority creditor's name and mailing address Sysco Food Services of Virginia, LLC 5081 South Valley Pike Harrisonburg, VA 22801 Date(s) debt was incurred <u>2016</u> Last 4 digits of account number <u>5534</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$23,063.24

Debtor	Travinia Italian Kitchen Holdings, Inc Name	Case number (if known)
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3.26	Nonpriority creditor's name and mailing address Sysco KY 7705 National Turn Pike Louisville, KY 40214 Date(s) debt was incurred <u>2016</u> Last 4 digits of account number <u>6823</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$22,145.78
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3.27	Nonpriority creditor's name and mailing address Sysco of Columbia 131 Sysco Ct Columbia, SC 29209 Date(s) debt was incurred <u>2016</u> Last 4 digits of account number <u>2685</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$36,794.91
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3.28	Nonpriority creditor's name and mailing address Sysco of Columbia 131 Sysco Ct Columbia, SC 29209 Date(s) debt was incurred <u>2016</u> Last 4 digits of account number <u>7005</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$28,377.57
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3.29	Nonpriority creditor's name and mailing address Sysco of Columbia 131 Sysco Ct Columbia, SC 29209 Date(s) debt was incurred <u>2016</u> Last 4 digits of account number <u>8204</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$40,911.00
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3.30	Nonpriority creditor's name and mailing address Sysco PA 600 Packer Ave Philadelphia, PA 19148 Date(s) debt was incurred <u>2016</u> Last 4 digits of account number <u>7528</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$7,444.34
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3.31	Nonpriority creditor's name and mailing address TFK Developement Company Inc 12 Chancellors Park Court Simpsonville, SC 29681 Date(s) debt was incurred <u>2011</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Preferred Stockholder</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250,000.00
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3.32	Nonpriority creditor's name and mailing address Todd B. Kimmelman 19 Greenlee Hill Court Greenville, SC 29615 Date(s) debt was incurred <u>2011</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Preferred Stockholder</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$250,000.00
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Debtor	Travinia Italian Kitchen Holdings, Inc Name _____	Case number (if known) _____
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3.33	Nonpriority creditor's name and mailing address Tommy Vlahos 1631 Coventry Rd Myrtle Beach, SC 29575 Date(s) debt was incurred <u>2011</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Preferred Stockholder</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$100,000.00</u>
<hr/>			
3.34	Nonpriority creditor's name and mailing address Verizon Wireless PO Box 660108 Dallas, TX 75266 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Internet and Phone</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$500.00</u>
<hr/>			
3.35	Nonpriority creditor's name and mailing address West Town Bank & Trust 320 N Meridian Ste 1011 Indianapolis, IN 46204 Date(s) debt was incurred <u>4/1/2014</u> Last 4 digits of account number <u>1429</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$610,564.96</u>
<hr/>			
3.36	Nonpriority creditor's name and mailing address West Town Bank & Trust 320 N Meridian Ste 1011 Indianapolis, IN 46204 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$441,544.20</u>
<hr/>			
3.37	Nonpriority creditor's name and mailing address West Town Bank & Trust 320 N Meridian Ste 1011 Indianapolis, IN 46204 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Guaranty</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$540,823.10</u>
<hr/>			
3.38	Nonpriority creditor's name and mailing address William Steen 26 Sable Glen Dr Greenville, SC 29615 Date(s) debt was incurred <u>2011</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Preferred Stockholder</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$250,000.00</u>
<hr/>			
3.39	Nonpriority creditor's name and mailing address William Walker, Jr. 135 East Main Street Lexington, SC 29071 Date(s) debt was incurred <u>2011</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Preferred Stockholder</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$250,000.00</u>

Debtor **Travinia Italian Kitchen Holdings, Inc** Case number (if known) _____

Name

3.40 Nonpriority creditor's name and mailing address **Womble Carlyle Sandridge & Rice**
550 S Main St
Suite 400
Greenville, SC 29601
 Date(s) debt was incurred 2015-present
 Last 4 digits of account number _____

As of the petition filing date, the claim is: *Check all that apply.* **\$184,219.74**
☐ Contingent
☐ Unliquidated
☐ Disputed
 Basis for the claim: Legal
 Is the claim subject to offset? ☒ No ☐ Yes

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address

On which line in Part 1 or Part 2 is the related creditor (if any) listed?

Last 4 digits of account number, if any

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 0.00
5b. +	\$ 6,279,175.67
5c.	\$ 6,279,175.67

Fill in this information to identify the case:

Debtor name Travinia Italian Kitchen Holdings, Inc

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Real Estate lease**

State the term remaining

List the contract number of any government contract _____

**Merovan Center
1200 Woodruff Rd
B-3
Greenville, SC 29607**

Fill in this information to identify the case:

Debtor name Travinia Italian Kitchen Holdings, Inc

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **Mark Craig**

**100 Castellan Dr.
Greer, SC 29650**

Store Master Funding

☐ D _____
☒ E/F 3.19
☐ G _____

2.2 **Mark Craig**

**100 Castellan Dr.
Greer, SC 29650**

JBG Woodbridge

☐ D _____
☒ E/F 3.6
☐ G _____

2.3 **Mark Craig**

**100 Castellan Dr.
Greer, SC 29650**

**OCT Stonefield
Properties**

☐ D _____
☒ E/F 3.12
☐ G _____

2.4 **Mark Craig**

**100 Castellan Way
Greer, SC**

**Branch Banking &
Trust**

☐ D _____
☒ E/F 3.2
☐ G _____

2.5 **Mark Craig**

**100 Castellan Way
Greer, SC**

First Reliance

☐ D _____
☒ E/F 3.5
☐ G _____

Debtor Travinia Italian Kitchen Holdings, Inc Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.6 Mark Craig 100 Castellan Way Greer, SC Suntrust Bank ☐ D _____
☒ E/F 3.20
☐ G _____

2.7 Mark Craig 100 Castellan Way Greer, SC West Town Bank & Trust ☐ D _____
☒ E/F 3.35
☐ G _____

2.8 Mark Craig 100 Castellan Way Greer, SC West Town Bank & Trust ☐ D _____
☒ E/F 3.36
☐ G _____

2.9 Mark Craig 100 Castellan Way Greer, SC NWFCU ☐ D _____
☒ E/F 3.11
☐ G _____

2.10 Mark Craig 100 Castellan Way Greer, SC West Town Bank & Trust ☐ D _____
☒ E/F 3.37
☐ G _____

2.11 The Craig Group 1200 Woodruff Rd C-36 Greenville, SC 29607 West Town Bank & Trust ☐ D _____
☒ E/F 3.35
☐ G _____

2.12 The Craig Group 1200 Woodruff Rd C-36 Greenville, SC 29607 Branch Banking & Trust ☐ D _____
☒ E/F 3.2
☐ G _____

2.13 The Craig Group 1200 Woodruff Rd C-36 Greenville, SC 29607 First Reliance ☐ D _____
☒ E/F 3.5
☐ G _____

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known)

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.14	The Craig Group	1200 Woodruff Rd C-36 Greenville, SC 29607	Suntrust Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F 3.20 <input type="checkbox"/> G _____
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2.15	The Craig Group	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F 3.36 <input type="checkbox"/> G _____
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2.16	The Craig Group	1200 Woodruff Rd C-36 Greenville, SC 29607	NWFCU	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F 3.11 <input type="checkbox"/> G _____
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2.17	The Craig Group	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F 3.37 <input type="checkbox"/> G _____
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2.18	Travinia Italian Ki Charlottesville, LLC	1200 Woodruff Rd C36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F 3.35 <input type="checkbox"/> G _____
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2.19	Travinia Italian Ki Charlottesville, LLC	1200 Woodruff Rd C36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F 3.36 <input type="checkbox"/> G _____
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2.20	Travinia Italian Ki Charlottesville, LLC	1200 Woodruff Rd C36 Greenville, SC 29607	NWFCU	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F 3.11 <input type="checkbox"/> G _____
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Debtor Travinia Italian Kitchen Holdings, Inc Case number (if known) _____

Additional Page to List More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor

Column 2: Creditor

2.21	Travinia Italian Ki Charlottesville, LLC	1200 Woodruff Rd C36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.37</u> <input type="checkbox"/> G _____
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2.22	Travinia Italian Kitch Newport News, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.36</u> <input type="checkbox"/> G _____
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2.23	Travinia Italian Kitch Newport News, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	NWFCU	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
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2.24	Travinia Italian Kitch Newport News, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607 Note Holder	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.37</u> <input type="checkbox"/> G _____
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2.25	Travinia Italian Kitch Morrisville, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Sysco of Columbia	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.29</u> <input type="checkbox"/> G _____
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2.26	Travinia Italian Kitchen Asheville, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Reinhart TN	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.13</u> <input type="checkbox"/> G _____
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2.27	Travinia Italian Kitchen Leesburg, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	OCT Stonefield Properties	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.12</u> <input type="checkbox"/> G _____
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Debtor Travinia Italian Kitchen Holdings, Inc Case number (if known) _____

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2.28	Travinia Italian Kitchen Lexington, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Sysco KY	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.26</u> <input type="checkbox"/> G _____
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2.29	Travinia Italian Kitchen Lexington, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Suntrust Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.20</u> <input type="checkbox"/> G _____
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2.30	Travinia Italian Kitchen Lexington, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607 Note Holder	NWFCU	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
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2.31	Travinia Italian Kitchen Philly, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Sysco PA	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.30</u> <input type="checkbox"/> G _____
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2.32	Travinia Italian Kitchen Richmond, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Federal Realty Investments	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.4</u> <input type="checkbox"/> G _____
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2.33	Travinia Italian Kitchen Asheville, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	OCT Stonefield Properties	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.12</u> <input type="checkbox"/> G _____
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2.34	Travinia Italian Kitchen Asheville, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Sysco of Columbia	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.28</u> <input type="checkbox"/> G _____
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Debtor Travinia Italian Kitchen Holdings, Inc Case number (if known) _____

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2.35	Travinia Italian Kitchen Asheville, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Sysco Food Services of Virginia, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.25</u> <input type="checkbox"/> G _____
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2.36	Travinia Italian Kitchen Asheville, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.35</u> <input type="checkbox"/> G _____
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2.37	Travinia Italian Kitchen Asheville, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Branch Banking & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.2</u> <input type="checkbox"/> G _____
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2.38	Travinia Italian Kitchen Asheville, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Suntrust Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.20</u> <input type="checkbox"/> G _____
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2.39	Travinia Italian Kitchen Asheville, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.36</u> <input type="checkbox"/> G _____
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2.40	Travinia Italian Kitchen Asheville, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	NWFCU	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
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2.41	Travinia Italian Kitchen Asheville, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.37</u> <input type="checkbox"/> G _____
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Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known) _____

Additional Page to List More Codebtors

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2.42	Travinia Italian Kitchen at Aiken, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Store Master Funding	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.19</u> <input type="checkbox"/> G _____
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2.43	Travinia Italian Kitchen at Aiken, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	OCT Stonefield Properties	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.12</u> <input type="checkbox"/> G _____
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2.44	Travinia Italian Kitchen at Aiken, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Sysco of Columbia	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.27</u> <input type="checkbox"/> G _____
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2.45	Travinia Italian Kitchen at Aiken, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.35</u> <input type="checkbox"/> G _____
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2.46	Travinia Italian Kitchen at Aiken, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Branch Banking & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.2</u> <input type="checkbox"/> G _____
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2.47	Travinia Italian Kitchen at Aiken, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Suntrust Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.20</u> <input type="checkbox"/> G _____
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2.48	Travinia Italian Kitchen at Aiken, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.36</u> <input type="checkbox"/> G _____
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Debtor Travinia Italian Kitchen Holdings, Inc Case number (if known) _____

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Column 1: Codebtor

Column 2: Creditor

2.49	Travinia Italian Kitchen at Aiken, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	NWFCU	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
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2.50	Travinia Italian Kitchen at Aiken, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.37</u> <input type="checkbox"/> G _____
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2.51	Travinia Italian Kitchen at Destin, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Sysco AL	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.21</u> <input type="checkbox"/> G _____
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2.52	Travinia Italian Kitchen at Destin, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.35</u> <input type="checkbox"/> G _____
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2.53	Travinia Italian Kitchen at Destin, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Suntrust Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.20</u> <input type="checkbox"/> G _____
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2.54	Travinia Italian Kitchen at Destin, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607 Note Holder	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.36</u> <input type="checkbox"/> G _____
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2.55	Travinia Italian Kitchen at Destin, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	NWFCU	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
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Debtor Travinia Italian Kitchen Holdings, Inc Case number (if known) _____

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Column 2: Creditor

2.56	Travinia Italian Kitchen at Destin, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.37</u> <input type="checkbox"/> G _____
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2.57	Travinia Italian Kitchen at Leesburg, LL	1200 Woodruff Rd C36 Greenville, SC 29607	Reinhart VA	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.14</u> <input type="checkbox"/> G _____
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2.58	Travinia Italian Kitchen at Leesburg, LL	1200 Woodruff Rd C-36 Greenville, SC 29607 Note holder	First Reliance	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.5</u> <input type="checkbox"/> G _____
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2.59	Travinia Italian Kitchen at Leesburg, LL	1200 Woodruff Rd C36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.35</u> <input type="checkbox"/> G _____
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2.60	Travinia Italian Kitchen at Leesburg, LL	1200 Woodruff Rd C36 Greenville, SC 29607	Branch Banking & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.2</u> <input type="checkbox"/> G _____
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2.61	Travinia Italian Kitchen at Leesburg, LL	1200 Woodruff Rd C36 Greenville, SC 29607	Suntrust Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.20</u> <input type="checkbox"/> G _____
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2.62	Travinia Italian Kitchen at Leesburg, LL	1200 Woodruff Rd C36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.36</u> <input type="checkbox"/> G _____
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Debtor Travinia Italian Kitchen Holdings, Inc Case number (if known) _____

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Column 2: Creditor

2.63	Travinia Italian Kitchen at Leesburg, LL	1200 Woodruff Rd C36 Greenville, SC 29607	NWFCU	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
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2.64	Travinia Italian Kitchen at Leesburg, LL	1200 Woodruff Rd C36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.37</u> <input type="checkbox"/> G _____
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2.65	Travinia Italian Kitchen at Morrisville,	1200 Woodruff Rd C-36 Greenville, SC 29607 Note holder	Branch Banking & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.2</u> <input type="checkbox"/> G _____
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2.66	Travinia Italian Kitchen at Morrisville,	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.35</u> <input type="checkbox"/> G _____
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2.67	Travinia Italian Kitchen at Morrisville,	1200 Woodruff Rd C-36 Greenville, SC 29607	Suntrust Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.20</u> <input type="checkbox"/> G _____
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2.68	Travinia Italian Kitchen at Morrisville,	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.36</u> <input type="checkbox"/> G _____
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2.69	Travinia Italian Kitchen at Morrisville,	1200 Woodruff Rd C-36 Greenville, SC 29607	NWFCU	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
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Debtor **Travinia Italian Kitchen Holdings, Inc** Case number (if known) _____

Additional Page to List More Codebtors

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Column 1: Codebtor

Column 2: Creditor

2.70	Travinia Italian Kitchen at Morrisville,	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.37</u> <input type="checkbox"/> G _____
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2.71	Travinia Italian Kitchen at Richmond, LL	1200 Woodruff Rd C36 Greenville, SC 29607	Sysco Food Services of Virginina, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.23</u> <input type="checkbox"/> G _____
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2.72	Travinia Italian Kitchen at Richmond, LL	1200 Woodruff Rd C-36 Greenville, SC 29607 Note holder	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.35</u> <input type="checkbox"/> G _____
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2.73	Travinia Italian Kitchen at Richmond, LL	1200 Woodruff Rd C36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.36</u> <input type="checkbox"/> G _____
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2.74	Travinia Italian Kitchen at Richmond, LL	1200 Woodruff Rd C36 Greenville, SC 29607	NWFCU	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
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2.75	Travinia Italian Kitchen at Richmond, LL	1200 Woodruff Rd C36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.37</u> <input type="checkbox"/> G _____
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2.76	Travinia Italian Kitchen Charlottesville	1200 Woodruff Rd C-36 Greenville, SC 29607	OCT Stonefield Properties	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.12</u> <input type="checkbox"/> G _____
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2.77	Travinia Italian Kitchen Charlottesville	1200 Woodruff Rd C-36 Greenville, SC 29607	Sysco Food Services of Virginia, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.22</u> <input type="checkbox"/> G _____
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2.78	Travinia Italian Kitchen Charlottesville	1200 Woodruff Rd C-36 Greenville, SC 29607	Reinhart VA	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.15</u> <input type="checkbox"/> G _____
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2.79	Travinia Italian Kitchen Charlottesville	1200 Woodruff Rd C-36 Greenville, SC 29607 Note holder	Suntrust Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.20</u> <input type="checkbox"/> G _____
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2.80	Travinia Italian Kitchen Leesburg, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Sysco Food Services of Virginia, LLC	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.24</u> <input type="checkbox"/> G _____
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2.81	Travinia Italian Kitchen Myrtle Beach, L	1200 Woodruff Rd C-36 Greenville, SC 29607	Suntrust Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.20</u> <input type="checkbox"/> G _____
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2.82	Travinia Italian Kitchen Newport News	1200 Woodruff Rd C-36 Greenville, SC 29607	Reinhart VA	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.16</u> <input type="checkbox"/> G _____
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2.83	Travinia Italian Kitchen Richmond, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	Reinhart VA	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.17</u> <input type="checkbox"/> G _____
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Debtor Travinia Italian Kitchen Holdings, Inc Case number (if known) _____

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2.84	Travinia Italian Kitchen Woodbridge, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	JBG Woodbridge	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.6</u> <input type="checkbox"/> G _____
<hr/>				
2.85	Travinia Italian Kitchen Woodbridge, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	OCT Stonefield Properties	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.12</u> <input type="checkbox"/> G _____
<hr/>				
2.86	Travinia Italian Kitchen Woodbridge, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.35</u> <input type="checkbox"/> G _____
<hr/>				
2.87	Travinia Italian Kitchen Woodbridge, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	First Reliance	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.5</u> <input type="checkbox"/> G _____
<hr/>				
2.88	Travinia Italian Kitchen Woodbridge, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.36</u> <input type="checkbox"/> G _____
<hr/>				
2.89	Travinia Italian Kitchen Woodbridge, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	NWFCU	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.11</u> <input type="checkbox"/> G _____
<hr/>				
2.90	Travinia Italian Kitchen Woodbridge, LLC	1200 Woodruff Rd C-36 Greenville, SC 29607	West Town Bank & Trust	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.37</u> <input type="checkbox"/> G _____
<hr/>				

Fill in this information to identify the case:

Debtor name Travinia Italian Kitchen Holdings, Inc

United States Bankruptcy Court for the: DISTRICT OF SOUTH CAROLINA

Case number (if known) _____

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

From the beginning of the fiscal year to filing date:
From 1/01/2019 to **Filing Date**

Sources of revenue
Check all that apply

☒ Operating a business

☐ Other _____

Gross revenue
(before deductions and exclusions)

\$1,185,398.89

For prior year:
From 1/01/2018 to 12/31/2018

☒ Operating a business

☐ Other _____

\$8,926,383.16

For year before that:
From 1/01/2017 to 12/31/2017

☒ Operating a business

☐ Other _____

\$10,851,167.57

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.

Creditor's Name and Address

Dates

Total amount of value

Reasons for payment or transfer
Check all that apply

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known) _____

or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
4.1. Kevin Cox 201 Farmwood Fountain Inn, SC 29644 VP Operations	1/6/18-present 6/28/2018 10/25/2018	\$74,394.09	Salary 72,531.02 travel reimbursement 1381.00 travel reimbursement 481.96
4.2. Jenny Aponte 105 Foxbriar Court Simpsonville, SC 29681 Controller	1/6/2018-present	\$53,231.24	Salary
4.3. Lisa Gonzalez 110 Foxbriar Court Simpsonville, SC 29681 Bookkeeper	1/6/2018-present 11/30/2018 12/14/2018	\$23,762.55	Salary 23669.08 Supplies reimbursement 87.86 travel reimbursement 561.00

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

Creditor's name and address	Describe of the Property	Date	Value of property
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6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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Part 3: Legal Actions or Assignments

7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
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8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known) _____

☐ None

	Recipient's name and address	Description of the gifts or contributions	Dates given	Value
9.1.	Arizona's Childrens Charities PO Box 529 Mauldin, SC	cash	12/21/17	\$1,000.00
	Recipients relationship to debtor Charity CEO supports			

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**☒ None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1.	Beal, LLC PO Box 11277 Columbia, SC 29211		1/17/19	\$250.00
	Email or website address			
	Who made the payment, if not debtor? Mark Craig			
11.2.	Beal, LLC PO Box 11277 Columbia, SC 29211		2/22/19	\$115.00
	Email or website address			
	Who made the payment, if not debtor? Travinia Italian Kitchen at Leesburg, LLC			

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known) _____

	Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.3.	Beal, LLC PO Box 11277 Columbia, SC 29211		2/22/19	\$115.00
	Email or website address			
	Who made the payment, if not debtor? Travinia Italian Kitchen at Charlottesville, LLC			
11.4.	Beal, LLC PO Box 11277 Columbia, SC 29211		2/22/19	\$115.00
	Email or website address			
	Who made the payment, if not debtor? Travinia Italian Kitchen at Richmond, LLC			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☐ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
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Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known) _____

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address

Nature of the business operation, including type of services the debtor provides

If debtor provides meals and housing, number of patients in debtor's care

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address

Last 4 digits of account number

Type of account or instrument

Date account was closed, sold, moved, or transferred

Last balance before closing or transfer

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address

Names of anyone with access to it
Address

Description of the contents

Do you still have it?

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address

Names of anyone with access to it

Description of the contents

Do you still have it?

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known) _____

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.**Report all notices, releases, and proceedings known, regardless of when they occurred.****22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

- ☒ No.
- ☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
---------------------------	-------------------------------------	--------------------	----------------

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No.
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No.
- ☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
-----------------------	---------------------------------------	-----------------------------	----------------

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.1. Travinia Italian Kitchen at Aiken, LLC 1200 Woodruff Rd C-36 Greenville, SC 29607	Restaurant	Dates business existed EIN: 262364877 From-To 4/2009-12/2016
25.2. Travinia Italian Kitchen Asheville, LLC 1200 Woodruff Rd C-36 Greenville, SC 29607	Restaurant	EIN: 264790109 From-To 9/2009-2/2019

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known) _____

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.
25.3. Travinia Italian Ki Charlottesville, LLC 1200 Woodruff Rd C-36 Greenville, SC 29607	Restaurant	Dates business existed EIN: 900889933 From-To 3/2013-present
25.4. Travinia Italian Kitchen at Destin, LLC 1200 Woodruff Rd C-36 Greenville, SC 29607	Restaurant	EIN: 800871784 From-To 7/2013-12/2016
25.5. Travinia Italian Kitchen Lexington, LLC 1200 Woodruff Rd Greenville, SC 29607	Restaurant	EIN: 352509339 From-To 4/2015-11/2016
25.6. Travinia Italian Kitchen at Leesburg, LL 1200 Woodruff Rd C-36 Greenville, SC 29607	Restaurant	EIN: 272238914 From-To 3/2003-present
25.7. Travinia Italian Kitchen at Morrisville, 1200 Woodruff Rd C-36 Greenville, SC 29607	Restaurant	EIN: 453915954 From-To 5/2012-present
25.8. Travinia Italian Kitch Newport News, LLC 1200 Woodruff Rd C-36 Greenville, SC 29607	Restaurant	EIN: 611731575 From-To 10/2014-6/2018
25.9. Travinia Italian Kitchen at Richmond, LL 1200 Woodruff Rd C-36 Greenville, SC 29607	Restaurant	EIN: 901027297 From-To 8/2014-present
25.10 Travinia Italian Kitchen Woodbridge, LLC 1200 Woodruff Rd C-36 Greenville, SC 29607	Restaurant	EIN: 455259945 From-To 12/2016-3/2017
25.11 Travinia Italian Kitch Philadelphia, LLC 1200 Woodruff Rd C-36 Greenville, SC 29607	Restaurant	EIN: From-To 11/2015-10/2016

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known) _____

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address		Date of service From-To
26a.1.	Jenny Aponte 105 Foxbriar Court Simpsonville, SC 29681	2011-present
26a.2.	Lisa Gonzalez 110 Foxbriar Court Simpsonville, SC 29681	2016-present
26a.3.	Scott and Company PO Box 8388 Columbia, SC 29202	2014-present
26a.4.	Stacy Knight PO Box 529 Mauldin, SC 29662	2011-present
26a.5.	Don Mark Cochran PO 529 Mauldin, SC 29662	2011-present
26a.6.	Mark Craig 100 Castellan Dr. Greer, SC 29650	2011-present

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☒ None

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☒ None

Name and address	If any books of account and records are unavailable, explain why
------------------	---

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address	
26d.1.	West Town Bank & Trust 320 N Meridian Ste 1011 Indianapolis, IN 46204
26d.2.	First Reliance 150 Highway 14 Simpsonville, SC 29681

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No☐ Yes. Give the details about the two most recent inventories.

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known) _____

Name of the person who supervised the taking of the inventory

Date of inventory

The dollar amount and basis (cost, market, or other basis) of each inventory

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Mark Craig	1200 Woodruff Rd C-36 Greenville, SC 29607	CEO/Board/Common stockholder	59.61%
Kevin Cox	201 Farmwood Fountain Inn, SC 29644	Board/Common Stockholder	17.79%
Chris Hill	6 Apple Jack Ln Taylors, SC 29687	Common Stockholder	10.87%
Leslie Miller	2209 Hidden Ridge Circle Birmingham, AL 35243	Common Stockholder	7.41%
J. Metz Looper	5 Saluda Lake Circle Greenville, SC 29611	Common Stockholder	2.47%
GAP Creek Holdings, LLC	PO 1415 Easley, SC 29641	Common Stockholder	1.5%
Tigre Holdings, LLC	PO Box 3634 Greenville, SC 29608	Common Stockholder	.154%
MBS3 LLC	26 Sable Glen Dr Greenville, SC 29615	preferred stockholder	
William Steen	26 Sable Glen Dr Greenville, SC 29615	preferred stockholder	
TFK Developement Company Inc	12 Chancellors Park Court Simpsonville, SC 29681	preferred stockholder	
Todd B. Kimmelman	19 Greenlee Hill Court Greenville, SC 29615	preferred stockholder	

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known) _____

Name	Address	Position and nature of any interest	% of interest, if any
William Walker, Jr.	135 East Main Street Lexington, SC 29071	preferred stockholder	
Name	Address	Position and nature of any interest	% of interest, if any
SCRIP	1109 Medical Center Dr Augusta, GA 30909	preferred stockholder	
Name	Address	Position and nature of any interest	% of interest, if any
Tommy Vlahos	1631 Coventry Rd Myrtle Beach, SC 29575	preferred stockholder	
Name	Address	Position and nature of any interest	% of interest, if any
Linzell Harris	472 Hallman Court Downingtown, PA 19335	preferred stockholder	
Name	Address	Position and nature of any interest	% of interest, if any
Larry McKinny	5751 August Rd Greenville, SC 29605	Board/ preferred stockholder	
Name	Address	Position and nature of any interest	% of interest, if any
Jenny Aponte	105 Foxbriar Court Simpsonville, SC 29681	Controller	

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☒ No
☐ Yes. Identify below.

30. **Payments, distributions, or withdrawals credited or given to insiders**

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Kevin Cox 201 Farmwood Fountain Inn, SC 29644	Salary - \$71450.52 Travel Reimbursement - \$1381.11 Travel Reimbursement - \$481.96	1/6/18-present 6/28/18 10/25/18	Salary and travel reimbursement
	Relationship to debtor VP of Operations			

Debtor **Travinia Italian Kitchen Holdings, Inc**

Case number (if known) _____

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.2	Lisa Gonzalez 110 Foxbriar Court Simpsonville, SC 29681	Salary - \$30681.50 Supplies Reimbursement - \$87.86 Travel Reimbursement - \$561.00	1/6/18 - present 11/30/18 12/14/18	Salary, supplies and travel reimbursement
	Relationship to debtor Bookkeeper			
30.3	Jenny Aponte 105 Foxbriar Court Simpsonville, SC 29681	Salary - \$59986.40	1/6/2018-present	Salary
	Relationship to debtor Controller			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☐ No
- ☒ Yes. Identify below.

Name of the parent corporation

Travinia Italian Kitchen Holdings, LLC
1200 Woodruff Rd
C-36
Greenville, SC 29607

Employer Identification number of the parent corporation

EIN: **451353701**

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
- ☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the parent corporation

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **March 6, 2019****/s/ Mark Craig**

Signature of individual signing on behalf of the debtor

Mark Craig

Printed name

Position or relationship to debtor **CEO of Travinia Italian Kitchen Holdings, Inc.**

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
- ☐ Yes

United States Bankruptcy Court
District of South Carolina

In re **Travinia Italian Kitchen Holdings, Inc**

Debtor(s)

Case No.

Chapter

7

DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
- | | | |
|---|----|----------------------|
| For legal services, I have agreed to accept | \$ | <u>345.00</u> |
| Prior to the filing of this statement I have received | \$ | <u>345.00</u> |
| Balance Due | \$ | <u>0.00</u> |
2. The source of the compensation paid to me was:
- ☐ Debtor ☒ Other (specify): **Travinia Italian Kitchen at Charlottesville, LLC**
Travinia Italian Kitchen at Leesburg, LLC
Travinia Italian Kitchen at Richmond, LLC
3. The source of compensation to be paid to me is:
- ☐ Debtor ☒ Other (specify): **No further compensation is required**
4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
- ☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:
- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
 - Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
 - Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
 - [Other provisions as needed]
Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.
6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:
Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

March 6, 2019

Date

/s/ Adam J. Floyd

Adam J. Floyd

Signature of Attorney

Beal, LLC

PO Box 11277

Columbia, SC 29211

803-728-0803

ccooper@bealllc.com

Name of law firm

LOCAL OFFICIAL FORM 1007-1(b) TO SC LBR 1007-1

United States Bankruptcy Court
District of South Carolina

In re Travinia Italian Kitchen Holdings, Inc

Debtor(s)

Case No.

Chapter

7

CERTIFICATION VERIFYING CREDITOR MATRIX

The above named debtor, or attorney for the debtor if applicable, hereby certifies pursuant to South Carolina Local Bankruptcy Rule 1007-1 that the master mailing list of creditors submitted either on computer diskette, electronically filed via CM/ECF, or conventionally filed in a typed hard copy scannable format which has been compared to, and contains identical information to, the debtor's schedules, statements and lists which are being filed at this time or as they currently exist in draft form.

Master mailing list of creditors submitted via:

- (a) _____ computer diskette
- (b) _____ scannable hard copy
(number of sheets submitted _____)
- (c) X electronic version filed via CM/ECF

Date: March 6, 2019

/s/ Mark Craig

Mark Craig/CEO of Travinia Italian Kitchen Holdings, Inc.
Signer/Title

Date: March 6, 2019

/s/ Adam J. Floyd

Signature of Attorney
Adam J. Floyd
Beal, LLC
PO Box 11277
Columbia, SC 29211
803-728-0803

Typed/Printed Name/Address/Telephone

10749 SC

District Court I.D. Number

AMERICAN EXPRESS
PO BOX 30384
SALT LAKE CITY UT 84130

BRANCH BANKING & TRUST
PO BOX 58005
CHARLOTTE NC

CHARTER
PO BOX 742614
CINCINNATI OH 45274

FEDERAL REALTY INVESTMENTS
PO BOX 8500
PHILADELPHIA PA 19178

FIRST RELIANCE
PO BOX 6109
FLORENCE SC 29502

JBG WOODBRIDGE
C/O TENNENBAUM AND SAAS
4504 WALSH ST., #200
CHEVY CHASE MD 20815

LARRY MCKINNY
5751 AUGUST RD
GREENVILLE SC 29605

LAURENS ELECTRIC
1201 E BUTLER RD.
GREENVILLE SC 29607

LINZELL HARRIS
472 HALLMAN COURT
DOWNINGTOWN PA 19335

MARK CRAIG
100 CASTELLAN DR.
GREER SC 29650

MARK CRAIG
100 CASTELLAN WAY
GREER SC

MBS3 LLC
26 SABLE GLEN DR
GREENVILLE SC 29615

MEROVAN CENTER
1200 WOODRUFF RD
B-3
GREENVILLE SC 29607

NWFCU
2545 CENTERVILLE ROAD
HERNDON VA 20171

OCT STONEFIELD PROPERTIES
240 ROYAL PALM WAY #201
PALM BEACH FL 33480

REINHART TN
100 BUFFALO RD EXTENSION
JOHNSON CITY TN 37601

REINHART VA
1201 PROGRESS RD
RICHMOND VA 23234

SCRIP
1109 MEDICAL CENTER DR
AUGUSTA GA 30909

STORE MASTER FUNDING
8377 E. HARTFORD
SCOTTSDALE AZ 85255

SUNTRUST BANK
PO BANK 79079
BALTIMORE MD 21279

SYSCO AL
2001 W MAGNOLIA AVE
GENEVA AL 36340

SYSCO FOOD SERVICES OF VIRGININA, LLC
5081 SOUTH VALLEY PIKE
HARRISONBURG VA 22801

SYSCO KY
7705 NATIONAL TURN PIKE
LOUISVILLE KY 40214

SYSCO OF COLUMBIA
131 SYSCO CT
COLUMBIA SC 29209

SYSCO PA
600 PACKER AVE
PHILADELPHIA PA 19148

TFK DEVELOPEMENT COMPANY INC
12 CHANCELLORS PARK COURT
SIMPSONVILLE SC 29681

THE CRAIG GROUP
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TODD B. KIMMELMAN
19 GREENLEE HILL COURT
GREENVILLE SC 29615

TOMMY VLAHOS
1631 COVENTRY RD
MYRTLE BEACH SC 29575

TRAVINIA ITALIAN KI CHARLOTTESVILLE, LLC
1200 WOODRUFF RD
C36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCH NEWPORT NEWS, LLC
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCH MORRISVILLE, LLC
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN ASHEVILLE, LLC
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN LEESBURG, LLC
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN LEXINGTON, LLC
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN PHILLY, LLC
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN RICHMOND, LLC
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN ASHEVILLE, LLC
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN AT AIKEN, LLC
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN AT DESTIN, LLC
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN AT LEESBURG, LL
1200 WOODRUFF RD
C36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN AT LEESBURG, LL
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN AT MORRISVILLE,
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN AT RICHMOND, LL
1200 WOODRUFF RD
C36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN AT RICHMOND, LL
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN CHARLOTTESVILLE
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN LEESBURG, LLC
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN MYRTLE BEACH, L
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN NEWPORT NEWS
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN RICHMOND, LLC
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

TRAVINIA ITALIAN KITCHEN WOODBRIDGE, LLC
1200 WOODRUFF RD
C-36
GREENVILLE SC 29607

VERIZON WIRELESS
PO BOX 660108
DALLAS TX 75266

WELLS FARGO
PO BOX 29703
PHOENIX AZ 85038

WEST TOWN BANK & TRUST
320 N MERIDIAN
STE 1011
INDIANAPOLIS IN 46204

WILLIAM STEEN
26 SABLE GLEN DR
GREENVILLE SC 29615

WILLIAM WALKER, JR.
135 EAST MAIN STREET
LEXINGTON SC 29071

WOMBLE CARLYLE SANDRIDGE & RICE
550 S MAIN ST
SUITE 400
GREENVILLE SC 29601

**United States Bankruptcy Court
District of South Carolina**

In re **Travinia Italian Kitchen Holdings, Inc**

Debtor(s)

Case No.
Chapter

7

CORPORATE OWNERSHIP STATEMENT (RULE 7007.1)

Pursuant to Federal Rule of Bankruptcy Procedure 7007.1 and to enable the Judges to evaluate possible disqualification or recusal, the undersigned counsel for **Travinia Italian Kitchen Holdings, Inc** in the above captioned action, certifies that the following is a (are) corporation(s), other than the debtor or a governmental unit, that directly or indirectly own(s) 10% or more of any class of the corporation's(s') equity interests, or states that there are no entities to report under FRBP 7007.1:

Chris Hill
6 Apple Jack Ln
Taylors, SC 29687

Kevin Cox
201 Farmwood
Fountain Inn, SC 29644

Mark Craig
100 Castellan Way
Greer, SC

☐ None [*Check if applicable*]

March 6, 2019

Date

/s/ Adam J. Floyd

Adam J. Floyd

Signature of Attorney or Litigant

Counsel for **Travinia Italian Kitchen Holdings, Inc**

Beal, LLC

PO Box 11277

Columbia, SC 29211

803-728-0803

ccooper@bealllc.com